

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006245

FILED
Jan 23, 2009
Secretary of State

Entity Name: THE KNIGHTS OF CAPE CORAL, INC.

Current Principal Place of Business:

2628 DEL PRADO BLVD
CAPE CORAL, FL 33904

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 100623
CAPE CORAL, FL 33903

New Mailing Address:

P. O. BOX 100623
CAPE CORAL, FL 33910

FEI Number: 57-1199361

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOCHANSKI, RICHARD W
3518 S.E. 17TH AVE.
CAPE CORAL, FL 33904 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: MUFFER, DONALD M
Address: 3399 SE 19TH AVE
City-St-Zip: CAPE CORAL, FL 33904

Title: DT () Delete
Name: KOCHANSKI, RICHARD W
Address: 3518 SE 17TH AVE
City-St-Zip: CAPE CORAL, FL 33904

Title: DS () Delete
Name: BARONI, MARIO E
Address: 4533 SW 1ST PL
City-St-Zip: CAPE CORAL, FL 33914

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: HUFFER, DONALD M
Address: 3399 SE 19TH AVE
City-St-Zip: CAPE CORAL, FL 33904

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD W. KOCHANSKI

DT

01/23/2009

Electronic Signature of Signing Officer or Director

Date